



App. No. 09/693,565  
Amdt date June 20, 2003  
Reply to Office action of May 20, 2003

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GROUP 3600

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

*I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 20, 2003.*

Stephanie Daryaie

Stephanie Daryaie

Appl No. : 09/693,565  
Applicant : William F. Brooks, Jr., et al.  
Filed : October 20, 2000  
Title : ELECTRONIC TRANSMISSION AND TRACKING OF DEPOSIT  
INFORMATION

TC/A.U. : 3627  
Examiner : Elaine L. Gort

Docket No. : 40234/MEG/A484

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Post Office Box 7068  
Pasadena, CA 91109-7068

Commissioner:

**RESPONSE TO RESTRICTION REQUIREMENT**

In response to the Office action of May 20, 2003, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the list of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.



PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
AMENDMENT TRANSMITTAL LETTER**

*I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 20, 2003.*

*Stephanie Daryaie*

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Pasadena, CA 91109-7068  
June 20, 2003

Commissioner:

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	16	*20	0	x \$9.00	x \$18.00	0
Independent Claims	3	** 3	0	x \$42.00	x \$84.00	0
Multiple Dependent Claims ***				\$140.00	\$280.00	0
TOTAL FILING FEE						0
NO ADDITIONAL FEE REQUIRED ****	IF NO FEE REQUIRED, INSERT "0"					0
LIST INDEPENDENT CLAIMS: 1, 11 and 14						
* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3 ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3 *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME **** IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON-FEE AMENDMENTS"						

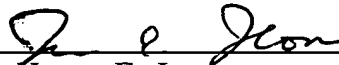
**Amendment Transmittal Letter**  
**Application No. 09/693,565**

\_\_\_\_\_ Attached is our check for \$ to pay the fees calculated above.  
\_\_\_\_\_ A Petition for Extension of Time and the required fee are enclosed.  
\_\_\_\_\_ Other enclosures:

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. **A copy of this letter is enclosed.**

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By  \_\_\_\_\_  
Jun-Young E. Jeon  
Reg. No. 43,693  
626/795-9900

JEJ/sd

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